		WATER WELL PLUGGING RECO	RD Form WWC-5P KSA	.82a-1212 ID NO	
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Was aunse		SE14 14 14	//	12	1/E
Dis	tance and direction from nearest town or	city street address of well if lo	cated within city?		
2	WATER WELLOWNER: FRED GNADT IR #, St. Address, Box #: PRED GNADT Board of Agriculture, Division of Water Resources Application Number:				
3	AN "X" IN SECTION BOX:				
	N N N E	WELL'S STATIC WATER WELL WAS USED AS:			
w	E	Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other			
	S W S E	Was a chemical / bacteri If yes, mo/day/yr sampl	ological sample submitte	d to Department?Yes	. /
5	TYPE OF BLANK CASING USED:				
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile				
	Blank casing diameter				
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
Grout Plug Intervals: Fromft. toft., Fromft., From					to tt.
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 1 Fuel storage 16 Other (specify below) 2 Sewer lines 7 Pit privy 12 Fertilizer storage				ecify below)	
2 Sewer lines 7 Pit privy 12 Fertilizer storage					
	4)Lateral lines 5 Cess Pool	9 Feedyard	(4) Abandoned wate	er well	
_		How many	1001? <i></i>		

FROM TO PLUGGING MATERIALS

53½ 581 dirt

50 53½ bentomte

32 50 dirt fill

0 32 gravel

0 0 clorox

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.